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FORM D
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JUN 3 0 2008

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB APPROVAL
OMB Number: 3235-0076
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hours per response.....16.00

Washington, DC

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTI

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Series A-1 Preferred Stock Offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	D TUOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
BrightDoor Systems, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 6501 Weston Parkway, Suite 320, Cary, NC 27513	Telephone Number (Including Area Code) (919) 678-9940
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Dveloping and marketing softwre and we-based software applications for customer relations for use in the real estate industry and providing complementary consulting services.	
Type of Business Organization	PROCESSED
	please specify):
business trust limited partnership, to be formed	JUL 0 3 2008
Actual or Estimated Date of Incorporation or Organization: Old	THOMSON REUTERS
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 77d(6).	or Section 230 SOLet seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	080541 <u>9</u> 1
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales in the exemption, a fee in the proper amount shall
ATTENTION	
Faiture to file notice in the appropriate states will not result in a loss of the federal exampropriate federal notice will not result in a loss of an available state exemption unle filling of a federal notice.	

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
 Each promoter of the issuer, if the issuer has been organized within the past five years; 		
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition or	of, 10% or more of	a class of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and management.	aging partners of	partnership issuers; and
 Each general and managing partner of partnership issuers. 		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Spear, Deven K.		
Business or Residence Address (Number and Street, City, State, Zip Code) c/o BrightDoor Systems, Inc., 6501 Weston Parkway, Suite 320, Cary, NC 27513		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Worthington, Michael C.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
c/o BrightDoor Systems, Inc., 6501 Weston Parkway, Suite 320, Cary, NC 27513		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Harrison, Sean R.		
Business or Residence Address (Number and Street, City, State, Zip Code)		
c/o BrightDoor Systems, Inc., 6501 Weston Parkway, Suite 320, Cary, NC 27513		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) WWC Capital Fund II, LP		
Business or Residence Address (Number and Street, City, State, Zip Code) 11911 Freedom Drive, Suite 1010, Reston, VA 20190		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) IDEA Fund I L.P.		
Business or Residence Address (Number and Street, City, State, Zip Code) 4505 Emperor Blvd., Suite 130, Durham, NC 27703		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Ohana Holdings, L.L.C.		
Business or Residence Address (Number and Street, City, State, Zip Code) 720 University Ave., Suite 200, Los Gatos, CA 95032		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Cromwell, Michael J., III		
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WWC Capital Fund II, LP, 11911 Freedom Drive, Suite 1010, Reston, VA 20190		

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director **Managing Partner** Full Name (Last name first, if individual) Cambier, John Business or Residence Address (Number and Street, City, State, Zip Code) c/o IDEA Fund I LP, 4505 Emperor Blvd., Suite 130, Durham, NC 27703 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Wingo, Scot Business or Residence Address (Number and Street, City, State, Zip Code) c/o ChannelAdvisor, 2701 Aerial Center Park, Morrisville, NC 27670 Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Director Promoter **Managing Partner** Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner **Executive Officer** П Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				•	В. І.	NFORMATI	ON ABOU	r offeri	νG				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No 🗷				
2. What is the minimum investment that will be accepted from any individual?								\$					
2								Yes ■	No □				
3. 4.	and the second s								_				
	commis If a pers or states	sion or sim on to be lis s, list the na	ilar remune ted is an ass ime of the b	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase int of a brok ore than five on for that	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	urities in tl EC and/or	ne offering. with a state	:	
Ful	l Name (l	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	i Street, Ci	ity, State, Z	ip Code)						
Na	me of Ass	sociated Br	oker or De	aler			· ·						
Sta						to Solicit I							
	(Check	"All States	" or check	individual	States)	***************************************	***************************************	.,,		·····			I States
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Ful	l Name (Last name	first, if indi	ividual)			<u></u>						<u> </u>
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Na	me of As	sociated Br	oker or De	aler	-								
Sta	tes in Wh	nich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				44*******	**************	☐ Al	l States
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Sta	ites in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individua	l States)		••••••	•••••	,,,,,			. [Al	I States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
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	MT RI	NE SC	NV SD	NH) (TN)	NJ TX	NM UT	NY VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	0.000.000.00	\$
	Equity	2,020,000.00	\$ 2,019,993.03
	Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify)	S	S
	Total	2,020,000.00	\$_2,019,993.03
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	7	\$ 2,019,993.03
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.			
	m	Type of Security	Dollar Amount Sold
	Type of Offering	•	
	Rule 505		\$
	Regulation A		\$
	Rulc 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	Z	\$_40,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$_40,000.00

	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPENSES AND USE OF I	ROCEEDS	
	and total expenses furnished in response to Part C -	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$1,980,000.00
5.	each of the purposes shown. If the amount for a	rocced to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross art C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$	s
	Purchase of real estate		\$	\$
	Purchase, rental or leasing and installation of ma	achinery	□\$	□\$
	• •	icilities		_
	Acquisition of other businesses (including the va offering that may be used in exchange for the assissuer pursuant to a merger)		\$. 🗆 \$
	Repayment of indebtedness		\$	\$ 305,194.52
	Working capital		s	\$ 1,674,798.5
				. 🗆 \$
			\$. [] s
	Column Totals		□ \$ <u>0.00</u>	5 1,979,993.0
	Total Payments Listed (column totals added)		⊘ \$ <u>1</u> ,	979,993.03
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exchange Commi-	ssion, upon writte	ile 505, the following in request of its staff,
Iss	uer (Print or Type)	Signature	Date	
В	ightDoor Systems, Inc.	<i>(Y N)</i>	June 23 , 2008	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)	<u></u>	
	an R. Harrison	Assistant Secretary		

ATTENTION -